### SOUTHERN IOWA MENTAL HEALTH CENTER OTTUMWA, IOWA

INDEPENDENT AUDITOR'S REPORT
FINANCIAL STATEMENTS
SCHEDULE OF FINDINGS
JUNE 30, 2015 AND 2014

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### BOARD OF DIRECTORS JUNE 30, 2015

<u>Name</u>	<u>Title</u>	<b>Expires</b>
Dusty Stewart	President	October 31, 2015
Jan Erhardt	Secretary/Treasurer	October 31, 2015
Steve Siegel	Director	Indefinite
Dale Taylor	Director	Indefinite
Jay Allison	Director	October 31, 2018
Bev VerSteegh	Director	October 31, 2015
Deb House Deere	Director	October 31, 2019
Brianne Stuchel	Director	October 31, 2018
Susan Howard	Director	October 31, 2017
Andrew Davis	Director	October 31, 2018
Julie Thomas	Director	October 31, 2020
Kibben Rumohr	Director	October 31, 2020
Christina Schark	Executive Director	Indefinite



#### INDEPENDENT AUDITOR'S REPORT

To the Board of Directors of Southern Iowa Mental Health Center

#### Report on the Financial Statements

We have audited the accompanying Statement of Financial Position of Southern Iowa Mental Health Center as of June 30, 2015, the related statements of activities, functional expenses and cash flows for the year then ended and the Notes to Financial Statements.

#### Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with U.S. generally accepted accounting principles. This includes the design, implementation and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

#### Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with U.S. generally accepted auditing standards and the standards applicable to financial audits contained in <u>Government Auditing Standards</u>, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Center's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Center's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

#### **Opinion**

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Southern Iowa Mental Health Center as of June 30, 2015 and the changes in its net assets and cash flows thereof for the year then ended in accordance with U.S. generally accepted accounting principles.

#### Other Reporting Required by Government Auditing Standards

In accordance with <u>Government Auditing Standards</u>, we have also issued our report dated October 8, 2015 on our consideration of Southern Iowa Mental Health Center's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing and not to provide an opinion on the internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with <u>Government Auditing Standards</u> in considering Southern Iowa Mental Health Center's internal control over financial reporting and compliance.

#### Report on Summarized Comparative Information

We have previously audited Southern Iowa Mental Health Center's June 30, 2014 financial statements, and we expressed an unmodified opinion on those audited financial statements in our report dated September 17, 2014. In our opinion, the summarized comparative information presented herein, as of and for the year ended June 30, 2014, is consistent, in all material respects, with the audited financial statements from which it has been derived.

ANDERSON, LARKIN & CO. P.C.

Anduson, Lartin & Co. P.C.

Ottumwa, Iowa October 8, 2015

### STATEMENTS OF FINANCIAL POSITION JUNE 30, 2015 WITH COMPARATIVE TOTALS AS OF JUNE 30, 2014

<u>ASSETS</u>	2015	2014
CURRENT ASSETS: Cash and cash equivalents Investments Receivables:	\$ 1,711,214 131,161	\$ 1,064,677 130,725
Accounts receivable; patient services, less allowance for doubtful accounts \$83,776 Accrued interest Other receivable Prepaid expenses Total current assets	319,328 296 21,943 22,483 2,206,425	443,331 393 29,721 9,686 1,678,533
FIXED ASSETS: Furniture, fixtures and equipment Less accumulated depreciation Book value of fixed assets	270,810 176,580 94,230	421,195 337,700 83,495
OTHER ASSETS: Investments	100,047	100,035
TOTAL ASSETS	\$ 2,400,702	\$ 1,862,063
<u>LIABILITIES AND NET ASSETS</u>		
CURRENT LIABILITIES: Accounts payable	\$ 28,773	\$ 23,766
Accrued liabilities: Payroll Payroll taxes Vacation Other Current maturities of capital lease obligations TOTAL CURRENT LIABILITIES	60,148 9,646 78,933 14,181 191,681	36,071 6,271 50,539 8,887 2,365 127,899
LONG-TERM LIABILITIES: Capital lease obligation- less current maturities		3,502
TOTAL LIABILITIES	191,681	131,401
NET ASSETS: Unrestricted	2,209,021	1,730,662

TOTAL LIABILITIES AND NET ASSETS \$ 2,400,702 \$ 1,862,063

## STATEMENTS OF ACTIVITIES YEAR ENDED JUNE 30, 2015 WITH COMPARATIVE TOTALS FOR THE YEAR ENDED JUNE 30, 2014

		2015		2014
	Unrestricted	Temporarily Restricted	<u>Total</u>	<u>Total</u>
PUBLIC SUPPORT AND REVENUES:				
Public support: County funds and grants Federal funds and grants United Way grant Total public support	\$ 131,781 51,747 183,528	\$ 21,381 21,381	\$ 131,781 51,747 21,381 204,909	\$ 398,423 108,049 25,354 531,826
Revenues: Private fees, Title XIX and other Promise Center Miscellaneous Gain (loss) on sale of equipment Total revenues	2,604,536 77,978 3,659 (1,028) 2,685,145	/5 /5 	2,604,536 77,978 3,659 (1,028) 2,685,145	1,567,447 74,027 2,967 93 1,644,534
Net assets released from restrictions: Satisfaction of purpose restrictions	21,381	(21,381)		
TOTAL PUBLIC SUPPORT AND REVENUES	2,890,054	<u> </u>	2,890,054	2,176,360
EXPENSES: Program services Support services	1,856,476 557,462	Ţ.	1,856,476 557,462	1,266,048 391,963
TOTAL EXPENSES	2,413,938		2,413,938	1,658,011
CHANGE IN NET ASSETS FROM OPERATIONS	476,116	ů.	476,116	518,349
OTHER CHANGES IN NET ASSETS: Investment income	2,243	-	2,243	
CHANGE IN NET ASSETS	478,359		478,359	518,349
NET ASSETS - Beginning of year	1,730,662		1,730,662	1,212,313
NET ASSETS - End of year	\$ 2,209,021	\$ 	\$ 2,209,021	\$ 1,730,662

## STATEMENTS OF FUNCTIONAL EXPENSES YEAR ENDED JUNE 30, 2015 WITH COMPARATIVE TOTALS FOR THE YEAR ENDED JUNE 30, 2014

		2015				2014	
	-	Program Services Mental Health	<u>s</u>	upport Services			
		Center <u>Programs</u>	М	anagement and <u>General</u>	Total		<u>Total</u>
EXPENSES:							
Salaries	\$	871,532	\$	374,716	\$ 1,246,248	\$	783,693
Payroll taxes		62,363		32,126	94,489		61,252
Group health insurance and							
employee benefits		82,002		42,244	124,246		72,338
Pension		23,981		12,354	36,335		27,624
Total salaries and related expenses		1,039,878		461,440	1,501,318		944,907
Professional fees		557,748			557,748		456,958
Provision for doubtful accounts		32,047		*	32,047		5,173
Accounting/Audit		390		10,325	10,325		12,439
Promise Center		22,742		-	22,742		24,074
Advertising		18,819		2,091	20,910	-	10,813
Office supplies		24,142		6,036	30,178		20,107
Telephone		14,404		3,601	18,005		7,054
Travel		9,630		19,551	29,181		6,281
Repairs and maintenance		33,034		8,259	41,293		30,789
Dues		2,405		267	2,672		4,880
Staff development		10,238		1,138	11,376		14,152
Insurance		18,562		2,062	20,624		20,334
Cleaning		8,549		2,137	10,686		4,506
Rent		43,590		10,898	54,488		28,088
Miscellaneous		2,798		25,184	27,982		23,812
Interest		4		1	5		635
Total expenses before depreciation		1,838,590		552,990	2,391,580		1,615,002
Depreciation		17,886	-	4,472	22,358		43,009
TOTAL EXPENSES	\$	1,856,476	\$	557,462	\$ 2,413,938		1,658,011

## STATEMENTS OF CASH FLOWS YEAR ENDED JUNE 30, 2015 WITH COMPARATIVE TOTALS FOR THE YEAR ENDED JUNE 30, 2014

		<u>2015</u>	2014
CASH FLOWS FROM OPERATING ACTIVITIES: Cash received from Counties Cash received from grants Cash received from patient services and Title XIX Cash received from (used in) other operations Cash paid for interest on capital lease obligation Cash paid to employees and suppliers  NET CASH PROVIDED BY OPERATING ACTIVITIES	\$	131,781 73,128 2,804,274 14,751 (43) (2,345,124) 678,767	\$ 398,423 133,403 1,635,526 (26,480) (635) (1,570,118) 570,119
CASH FLOWS FROM FINANCING ACTIVITIES: Principal payments on capital lease obligation		(190)	(2,162)
CASH FLOWS FROM INVESTING ACTIVITIES:  Purchase of fixed assets Proceeds from sale of assets Purchase of certificates of deposit Proceeds from certificates of deposit Interest received  NET CASH PROVIDED (USED) BY INVESTING ACTIVITIES		(39,609) 5,677 (448) - 2,340 (32,040)	(47,433) 250 200,192 4,490 157,499
NET INCREASE IN CASH AND CASH EQUIVALENTS		646,537	725,456
CASH AND CASH EQUIVALENTS - Beginning of year		1,064,677	339,221
CASH AND CASH EQUIVALENTS - End of year	\$	1,711,214	\$ 1,064,677
RECONCILIATION OF CHANGES IN NET ASSETS FROM OPERATIONS TO NET CASH BY OPERATING ACTIVITIES:	PRC	OVIDED	
Changes in net assets from operations  Adjustments to reconcile change in net assets to net cash provided by operating activities:	\$	476,116	\$ 518,349
Depreciation Provision for doubtful accounts Loss (gain) on sale of asset Decrease (increase) in accounts receivable Decrease (increase) in other receivable Decrease (increase) decrease in prepaid expenses Increase in accounts payable Increase in accrued liabilities		22,358 32,047 1,028 91,956 7,778 (12,796) 5,007 55,273	43,009 5,173 (92) (11,121) (29,448) 3,876 6,522 33,851
NET CASH PROVIDED BY OPERATING ACTIVITIES	\$	678,767	\$ 570,119

#### NOTES TO FINANCIAL STATEMENTS

JUNE 30, 2015

#### NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

#### A. Reporting Entity

Southern Iowa Mental Health Center is a nonprofit organization established to provide a comprehensive community mental health program for the diagnosis and treatment of psychiatric and psychological disorders and to promote the prevention of mental illness. Services are provided to residents of Southeastern Iowa.

The Center is exempt from income tax under Section 501(c)(3) of the Internal Revenue Code and a similar section of the Iowa income tax law which provide tax exemption for corporations organized and operated exclusively for religious, charitable, or educational purposes.

The Center's financial statements are prepared in accordance with U.S. generally accepted accounting principles as prescribed by the Financial Accounting Standards Board for non-profit organizations.

#### B. Basis of Accounting

Basis of accounting refers to when revenues and expenses are recognized in the accounts and reported in the financial statements. Basis of accounting relates to the timing of the measurements made, regardless of the measurement focus applied.

The accompanying financial statements have been prepared on the accrual basis of accounting in conformity with U.S. generally accepted accounting principles. Revenues are recognized when earned and expenses are recorded when the liability is incurred.

#### C. Basis of Presentation

Net assets and revenues, expenses, gains and losses are classified based on the existence or absence of donor-imposed restrictions. Accordingly, the net assets of the Center and changes therein are classified and reported as follows:

<u>Unrestricted net assets</u> – Net assets not subject to donor-imposed stipulations.

Revenues are reported as increases in unrestricted net assets unless use of the related assets is limited by donor-imposed restrictions. Expenses are reported as decreases in unrestricted net assets. Gains and losses on investments and other assets or liabilities are reported as increases or decreases in unrestricted net assets unless their use is restricted by explicit donor stipulation or by law.

#### D. Cash and Cash Equivalents

The Center considers savings accounts and all other highly liquid investments with an original maturity of three months or less when purchased to be cash equivalents.

E. <u>Receivables</u> – Receivables are shown at the amount expected to be collected after determining the allowance for doubtful accounts based on an aging of individual patient balances.

#### NOTES TO FINANCIAL STATEMENTS

#### JUNE 30, 2015

#### NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

#### F. Valuation of Investments

In determining fair value, the Center uses various valuation approaches. FASB establishes a fair value hierarchy for inputs used in measuring fair value that maximizes the use of observable inputs and minimizes the use of unobservable inputs by requiring that the most observable inputs be used when available. Observable inputs are those that market participants would use in pricing the asset or liability based on market data obtained from sources independent of the Center. Unobservable inputs reflect the Center's assumption about the inputs market participants would use in pricing the asset or liability developed based on the best information available in the circumstances. The fair value hierarchy is categorized into three levels based on the reliability of inputs as follows:

<u>Level 1</u> – Valuations based on unadjusted quoted prices in active markets for identical assets or liabilities that the Center has the ability to access. Valuation adjustments and block discounts are not applied to level 1 securities.

<u>Level 2</u> – Valuations based on quoted prices in markets that are not active or for which all significant inputs are observable, either directly or indirectly.

<u>Level 3</u> – Valuations based on inputs that are unobservable and significant to the overall fair value measurement.

The Center only holds Level 1 securities.

#### G. Contributions

The Center accounts for contributions in accordance with the recommendations of the Financial Accounting Standards Board. In accordance with FASB, contributions received are recorded as increases in unrestricted, temporarily restricted, or permanently restricted support, depending on the existence or nature of any donor restrictions.

All donor-restricted contributions are reported as increases in temporarily or permanently restricted net assets depending on the nature of the restriction. When a restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions.

The Center reports gifts of land, buildings, and equipment as unrestricted support unless explicit donor stipulations specify how the donated assets must be used. Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire long-lived assets are reported as restricted support. Absent explicit donor stipulations about how long the long-lived assets must be maintained, the Center reports expirations of donor restrictions when the donated or acquired long-lived assets are placed in service.

#### H. Patient Services Revenue

Patient services revenue is reported at the estimated realizable amounts from patients, third-party payers and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payors. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined.

#### NOTES TO FINANCIAL STATEMENTS

#### JUNE 30, 2015

#### NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

#### Property and Equipment

Property and equipment is stated at cost. Purchases of fixed assets in excess of \$500 that provide future benefits are capitalized. Depreciation is computed on the straight-line basis over the estimated useful lives of 3-10 years. No interest costs were capitalized since there were no qualifying assets. Depreciation expense for the year ended June 30, 2015, totaled \$19,693.

#### J. Compensated Absences

Center employees accumulate a limited amount of earned but unused vacation benefits payable to employees. Amounts representing the cost of accumulated compensated absences are recorded as liabilities and have been computed based on rates of pay in effect at June 30, 2015.

#### K. Employee Benefits

The Center has adopted a defined contribution pension plan covering substantially all employees who have completed one year of service and are at least 21 years of age. The Center contributes 4% of eligible employees' salaries into the pension plan. Employees become fully vested after one year of service. Years of service for purposes of defining plan years are those in which the employee completes at least 1000 hours of service. Pension expense for the year ended June 30, 2015, totaled \$36,335.

#### L. Advertising

The Center expenses advertising production costs as they are incurred and advertising communication costs the first time advertising takes place. Advertising expense was \$20,910 for the year ended June 30, 2015.

#### M. Use of Estimates

Management uses estimates and assumptions in preparing financial statements. Those estimates and assumptions affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities, and the reported revenues and expenses. Accordingly, actual results could differ from those estimates.

#### N. Allocated Expenses

The costs of providing the various programs and other activities have been summarized on a functional basis in the statement of activities. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

#### O. Comparative Financial Information

The financial statements include certain prior-year summarized comparative information in total but not by net asset class. Such information does not include sufficient detail to constitute a presentation in conformity with generally accepted accounting principles. Accordingly, such information should be read in conjunction with the Center's financial statements for the year ended June 30, 2014 from which summarized information was derived.

#### NOTE 2: INSURED DEPOSITS

The Center maintains its cash in bank deposit accounts which, at times, may exceed federally insured limits. The Center has not experienced any losses in such accounts. The Center had deposits in excess of federally insured limits of \$771,915 as of June 30, 2015.

#### NOTES TO FINANCIAL STATEMENTS

#### JUNE 30, 2015

#### NOTE 3: MAJOR REVENUE SOURCE

The Center provides treatment to clients that is paid for by funding from County, State and Federal sources and receives approximately 72% of its revenue from these sources.

#### NOTE 4: LEASE AGREEMENT

The Center leases office space under a month to month operating lease at a monthly rental amount of \$4,540. Rent expense on this lease for the year ended June 30, 2015, totaled \$54,488. The Center leases office space for the Promise Center under a month to month operating lease at a monthly rental amount of \$700. Included in Promise Center expenses is rent expense of \$8,400 for the year ended June 30, 2015. The Center leases copiers with lease terms of 60 months with monthly payments totaling \$483. Future minimum lease payments for the copier leases are as follows:

Year ended June 30,	
2016	\$ 5,798
2017	5,798
2018	5,798
2019	5,798
2020	590
	\$ 23.782

#### NOTE 5: TEMPORARILY RESTRICTED NET ASSETS

Temporarily restricted net assets consist of contributions received whose use has been limited by donor imposed purpose restrictions. The following is a summary of net assets released from restrictions by the satisfaction of the donor restrictions for the year ended June 30, 2015:

United Way sponsored programs

\$ 21.381

#### NOTE 6: RISK MANAGEMENT

Southern Iowa Mental Health Center is exposed to various risks of loss related to torts; theft of, damage to, and destruction of assets; errors and omissions; injuries to employees; and natural disasters. These risks are covered by commercial insurance purchased from independent third parties. The Center assumes liability for any deductibles and claims in excess of coverage limitations. Settled claims for these risks have not exceeded commercial insurance coverage for any of the past three years.

#### NOTE 7: FAIR VALUE MEASUREMENTS

The Center's assets recorded at fair value have been categorized based upon a fair value hierarchy in accordance with FASB. See Note 1 for a discussion of the Center's policies.

The Center's assets measured at fair value as of June 30, 2015 are as follows:

Level 1

Certificates of deposit

\$ 231.208

#### NOTE 8: RECLASSIFICATIONS

Certain amounts for the year ended June 30, 2014 have been reclassified for comparative purposes to conform to the June 30, 2015 presentation.

#### NOTE 9: EVALUATION OF SUBSEQUENT EVENTS

The Center has evaluated subsequent events through October 8, 2015, the date which the financial statements were available to be issued.



# INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

Board of Directors
Southern Iowa Mental Health Center

We have audited in accordance with U.S. generally accepted auditing standards and the standards applicable to financial audits contained in <u>Government Auditing Standards</u>, issued by the Comptroller General of the United States, the financial statements of Southern Iowa Mental Health Center, Ottumwa, Iowa, as of and for the year ended June 30, 2015, and the related notes to financial statements, and have issued our report thereon dated October 8, 2015.

#### Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered Southern Iowa Mental Health Center's internal control over financial reporting to determine the audit procedures appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of Southern Iowa Mental Health Center's internal control. Accordingly, we do not express an opinion on the effectiveness of Southern Iowa Mental Health Center's internal control.

Our consideration of internal control was for the limited purpose described in the preceding paragraph and was not designed to identify all deficiencies in the internal control that might be material weaknesses or significant deficiencies and, therefore, material weaknesses or significant deficiencies may exist that were not identified. However, as described in the accompanying Schedule of Findings, we identified a deficiency in internal control we consider to be a material weakness.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent or detect and correct misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control such that there is a reasonable possibility a material misstatement of the Center's financial statements will not be prevented or detected and corrected on a timely basis. We consider the deficiency described in the accompanying Schedule of Findings as item (A) to be a material weakness.

A significant deficiency is a deficiency, or a combination of deficiencies, in internal control which is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

#### Compliance and Other Matters

As part of obtaining reasonable assurance about whether Southern Iowa Mental Health Center's financial statements are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, non-compliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of non-compliance or other matters that are required to be reported under <u>Government Auditing Standards</u>.

Comments involving statutory and other legal matters about the Center's operations for the year ended June 30, 2015 are based exclusively on knowledge obtained from procedures performed during our audit of the financial statements of the Center. Since our audit was based on tests and samples, not all transactions that might have had an impact on the comments were necessarily audited. Comments involving statutory and other legal matters are not intended to constitute legal interpretations of those statutes.

#### Southern Iowa Mental Health Center's Responses to Findings

Southern Iowa Mental Health Center's responses to findings identified in our audit are described in the accompanying Schedule of Findings. Southern Iowa Mental Health Center's responses were not subjected to the auditing procedures applied in the audit of the financial statements and, accordingly, we express no opinion on them.

#### Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing and not to provide an opinion on the effectiveness of the Center's internal control or on compliance. This report is an integral part of an audit performed in accordance with <u>Government Auditing Standards</u> in considering the Center's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

We would like to acknowledge the many courtesies and assistance extended to us by personnel of Southern Iowa Mental Health Center during the course of our audit. Should you have any questions concerning any of the above matters, we shall be pleased to discuss them with you at your convenience.

ANDERSON, LARKIN & CO. P.C.

Andreson, Larten & Co. P.C.

Ottumwa, Iowa October 8, 2015

#### SCHEDULE OF FINDINGS

#### YEAR ENDED JUNE 30, 2015

#### Findings Related to the Financial Statements:

#### INTERNAL CONTROL DEFICIENCY:

(A) <u>Segregation of Duties</u> – Due to the small size of your organization, one employee performs many bookkeeping duties which are incompatible. This is a lack of segregation of duties, a problem commonly associated with small businesses and organizations.

<u>Recommendation</u> – We realize that with a limited number of office employees, segregation of duties is difficult. However, the Center should be aware of the lack of segregation of duties and periodically review its internal policies.

Response - The Center has hired and is training additional staff.

Conclusion - Response accepted.

#### INSTANCES OF NON-COMPLIANCE:

No matters were noted.

Other Findings Related to Required Statutory Reporting:

No matters were noted.